JUN-11-2004 FRI 12:12 PM CANTOR COLBURN LLP

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Under the Paperwork Reduction Aut of 1995, no persons are required to respond to a collection of information unless it displays a valid OMS control number RECEIVED Address to: CORRESPONDENCE CENTRAL FAX CENTER Commissioner for Patents **ADDRESS** P.O. Box 1450 JUN 2 4 2004 Alexandria, VA 22313-1450 INDICATION FORM Please recognize the following address as the correspondence address: 44639 Type Customer Number hore ØR Request for Customer Number (PTO/SB/125) submitted herewith. In the following listed application(s) or patent(s): Patent Date U.S. Filing Palent Number Application Number Date (if appropriate) (if appropriate) December 22, 2000 09/746,362 December 22, 2080 09/746.155 December 22, 2000 09/746,157 April 12, 2002 10/121,218 (check one) Typicid or Joe Albert Riddle IV Applicant or Palentee Frinted Name Assignee of record of the entire Interest. Statement under Signature 37 CFR 3.73(b) Is onclosed. (Form PTO/SR/PR) Date Attorney or Agent of record Address of signer: (Rog. No.) 3900 Essex Lane, Houston, TX 77027 NOTE: Signatures of all the inventors or assignace of record of the catine interest or their representative(s) are required. Submit multiple longs If more that one signature is required, see below .

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